## Case 18-02300 Doc 1 Filed 01/26/18 Entered 01/26/18 14:23:25 Desc Main Document Page 1 of 45

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | Chapter 7                     |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1:                 | Identity Yourself   |   |   |
|-----|-----------------------|---|---|---|
|     |                       |   | About Debtor 1:                                   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | You                   | r full name   |   |   |
|     | your<br>pictu<br>exar | e the name that is on<br>government-issued<br>are identification (for<br>mple, your driver's<br>ase or passport). | Jimmy First name                                  | First name                                    |
|     |                       |   | Middle name                                       | Middle name                                   |
|     | iden                  | g your picture<br>tification to your<br>ting with the trustee.  | Robinson Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  |                       | other names you have<br>d in the last 8 years   |   |   |
|     |                       | ide your married or<br>den names.   |   |   |
| 3.  | you<br>num<br>Indi    | y the last 4 digits of<br>r Social Security<br>ober or federal<br>vidual Taxpayer<br>tification number            | xxx-xx-1795                                       |   |

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Debtor 1 Jimmy L Robinson

Case number (if known)

| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|
| I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 6228 S Evans  | If Debtor 2 lives at a different address:   |
| Number, Street, City, State & ZIP Code Cook   | Number, Street, City, State & ZIP Code  |
| County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.   | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
| Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| <ul> <li>Check one:</li> <li>■ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> <li>□ I have another reason. Explain. (See 28 U.S.C. § 1408.)</li> </ul> | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)   |
|   | I have not used any business name or EINs.  Business name(s)  EINs  6228 S Evans Chicago, IL 60637 Number, Street, City, State & ZIP Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |

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Debtor 1 Jimmy L Robinson

Case number (if known)

| Par | t 2: Tell the Court About   | Your E      | 3ankruptcy Ca   | ise                                |   |   |               |
|-----|---|-------------|-----------------|------------------------------------|---|---|---------------|
| 7.  | The chapter of the Bankruptcy Code you are  |             |                 |                                    | of each, see <i>Notice Required b</i> page 1 and check the appropri | y 11 U.S.C. § 342(b) for Individuals Filing for Ban<br>ate box.   | kruptcy       |
|     | choosing to file under  | ■ Chapter 7 |                 |                                    |   |   |               |
|     |   |             | Chapter 11      |                                    |   |   |               |
|     |   |             | Chapter 12      |                                    |   |   |               |
|     |   |             | Chapter 13      |                                    |   |   |               |
|     |   |             | ,               |                                    |   |   |               |
| 8.  | How you will pay the fee  |             | about how yo    | u may pay. Typ<br>attorney is subr | ically, if you are paying the fee                                   | eck with the clerk's office in your local court for mo<br>yourself, you may pay with cash, cashier's check,<br>shalf, your attorney may pay with a credit card or o | , or money    |
|     |   |             |                 |                                    | allments. If you choose this ops (Official Form 103A).              | tion, sign and attach the Application for Individual  | ls to Pay     |
|     |   |             | but is not req  | uired to, waive y                  | our fee, and may do so only if                                      | ion only if you are filing for Chapter 7. By law, a ju<br>your income is less than 150% of the official pove<br>in installments). If you choose this option, you m  | rty line that |
|     |   |             |                 |                                    |   | ficial Form 103B) and file it with your petition.   |               |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | ■ N         |                 |                                    |   |   |               |
|     | iast o years:   | ш т         | es.<br>District |                                    | When  | Case number   |               |
|     |   |             | District        |                                    | When  | Cana a  |               |
|     |   |             | District        |                                    | When  | Case number   |               |
|     |   |             | Diomor          |                                    | ************  |   |               |
| 10. | Are any bankruptcy cases pending or being   | ■ N         | lo              |                                    |   |   |               |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ΠY          | es.             |                                    |   |   |               |
|     |   |             | Debtor          |                                    |   | Relationship to you   |               |
|     |   |             | District        |                                    | When  | Case number, if known   |               |
|     |   |             | Debtor          |                                    |   | Relationship to you   |               |
|     |   |             | District        |                                    | When  | Case number, if known   |               |
| 11. | Do you rent your residence?   | ПΝ          | lo. Go to l     | ine 12.                            |   |   |               |
|     | residence:  | ■ Y         | es. Has yo      | our landlord obta                  | iined an eviction judgment agai                                     | nst you?  |               |
|     |   |             |                 | No. Go to line                     | 12.   |   |               |
|     |   |             |                 | Yes. Fill out Initial              |   | n Judgment Against You (Form 101A) and file it w  | vith this     |
|     |   |             |                 |                                    |   |   |               |

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| Debtor 1 | Jimmy L Robinson | Document | Page 4 of 45 Case number (if known) |  |
|----------|------------------|----------|-------------------------------------|--|
|          |                  |          |                                     |  |

| Part | Report About Any Bu   | sinesses `  | You Own                       | n as a Sole Proprietor   |  |  |
|------|---|---|-------------------------------|--|--|--|
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.   | Go to Part 4.                 |  |  |  |
|      |   | ☐ Yes.  | Name and location of business |  |  |  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |   | Name                          | Name of business, if any   |  |  |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |   | Numb                          | per, Street, City, State & ZIP Code  |  |  |
|      | it to this petition.  |   |                               | k the appropriate box to describe your business:   |  |  |
|      |   |   |                               | Health Care Business (as defined in 11 U.S.C. § 101(27A))  |  |  |
|      |   |   |                               | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  |  |  |
|      |   |   |                               | Stockbroker (as defined in 11 U.S.C. § 101(53A))   |  |  |
|      |   |   |                               | Commodity Broker (as defined in 11 U.S.C. § 101(6))  |  |  |
|      |   |   |                               | None of the above  |  |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | 1 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement by Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process. |                               |  |  |  |
|      | For a definition of small   | ■ No.   | I am r                        | not filing under Chapter 11.   |  |  |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.   | I am f<br>Code                | filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |  |
|      |   | ☐ Yes.  | I am f                        | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |
| Part | 4: Report if You Own or   | Have Anv  | Hazardo                       | ous Property or Any Property That Needs Immediate Attention  |  |  |
|      | Do you own or have any  | _   |                               |  |  |  |
| 1-7. | property that poses or is alleged to pose a threat of imminent and  | ■ No. □ Yes.  | What is                       | the hazard?  |  |  |
|      | identifiable hazard to<br>public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |   |                               | diate attention is<br>, why is it needed?  |  |  |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |   |                               | s the property?  Number, Street, City, State & Zip Code  |  |  |
|      |   |   |                               |  |  |  |

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Debtor 1 Jimmy L Robinson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of                                |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-02300 Doc 1 Filed 01/26/18 Entered 01/26/18 14:23:25 Desc Main Document Page 6 of 45 Case number (if known) Debtor 1 Jimmy L Robinson Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jimmy L Robinson Signature of Debtor 2 Jimmy L Robinson

Executed on

MM / DD / YYYY

Signature of Debtor 1

January 26, 2018 MM / DD / YYYY

Executed on

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Debtor 1 Jimmy L Robinson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Terranc     | e S. Leeders           | Date              | January 26, 2018        |
|-----------------|------------------------|-------------------|-------------------------|
| Signature of    | Attorney for Debtor    |                   | MM / DD / YYYY          |
| Terrance S      | . Leeders 6244638      |                   |                         |
| Leeders &       | Associates             |                   |                         |
| Firm name       |                        |                   |                         |
| 205 W. Rai      | ndolph St.             |                   |                         |
| Suite 1401      | •                      |                   |                         |
| Chicago, IL     | 60606                  |                   |                         |
|                 | City, State & ZIP Code |                   |                         |
| Contact phone   | 312-346-7400           | <br>Email address | tleeders@leederslaw.com |
| 6244638 IL      |                        |                   |                         |
| Bar number & St | ate                    |                   |                         |

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|  |                  | DUCUIII           | ill I auc o oi <del>4</del> 3 |  |  |  |  |
|--|------------------|-------------------|-------------------------------|--|--|--|--|
| ill in this information to identify your case: |                  |                   |                               |  |  |  |  |
| Debtor 1                                       | Jimmy L Robinson |                   |                               |  |  |  |  |
|  | First Name       | Middle Name       | Last Name                     |  |  |  |  |
| Debtor 2                                       |                  |                   |                               |  |  |  |  |
| Spouse if, filing)                             | First Name       | Middle Name       | Last Name                     |  |  |  |  |
| United States Bankruptcy Court for the:        |                  | NORTHERN DISTRICT | OF ILLINOIS                   |  |  |  |  |
| Case number _                                  |                  |                   |                               |  |  |  |  |

☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part | 1: Summarize Your Assets  |             |                                  |
|------|---|-------------|----------------------------------|
|      |   |             | assets<br>of what you own        |
| 1.   | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$          | 0.00                             |
|      | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$          | 3,593.02                         |
|      | 1c. Copy line 63, Total of all property on Schedule A/B   | \$          | 3,593.02                         |
| Part | 2: Summarize Your Liabilities   |             |                                  |
|      |   |             | <b>liabilities</b><br>nt you owe |
| 2.   | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 0.00                             |
| 3.   | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$          | 0.00                             |
|      | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$          | 10,677.00                        |
|      | Your total liabilities  | \$          | 10,677.00                        |
| Part | 3: Summarize Your Income and Expenses   |             |                                  |
| 4.   | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$          | 754.00                           |
| 5.   | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$          | 1,394.00                         |
| Part | 4: Answer These Questions for Administrative and Statistical Records  |             |                                  |
| 6.   | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                    | ur other so | chedules.                        |
| 7.   | ■ Yes What kind of debt do you have?  |             |                                  |
|      | Vous debte are primarily consumer debte. Consumer debte are those "incurred by an individual primarily for  |             | l family or                      |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

905.92

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on <i>Schedule E/F</i> , copy the following:   | Tot | tal claim |
|--|-----|-----------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$  | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$  | 0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$  | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$  | 150.00    |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$  | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$ | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$  | 150.00    |

|                 | Cas                      | se 18-02300                                    | Doc 1           | Filed 01/26/18<br>Document | 8 Entered 01/26/18 14:23:2<br>Page 10 of 45  | 25 Desc          | Main  |
|-----------------|--------------------------|--|-----------------|----------------------------|--|------------------|---|
| Fill i          | in this inform           | ation to identify you                          | ır case and     |                            |  |                  |   |
| Deb             | tor 1                    | Jimmy L Robinso                                | on              |                            |  |                  |   |
| Dob             | tor 2                    | First Name                                     | Mid             | dle Name                   | Last Name  |                  |   |
|                 | tor 2<br>use, if filing) | First Name                                     | Mid             | dle Name                   | Last Name  |                  |   |
| Unit            | ed States Ban            | kruptcy Court for the                          | NORTHE          | ERN DISTRICT OF ILL        | LINOIS   |                  |   |
| Case            | e number                 |  |                 |                            |  |                  | Check if this is an amended filing                                    |
| Off             | icial For                | m 106A/B                                       |                 |                            |  |                  |   |
|                 |                          | A/B: Pro                                       | perty           |                            |  |                  | 12/15   |
| think<br>inforr | it fits best. Be         | as complete and accu<br>space is needed, attac | rate as possi   | ible. If two married peop  | f an asset fits in more than one category, list<br>ple are filing together, both are equally respo<br>the top of any additional pages, write your na | nsible for supp  | ying correct  |
| Part            | 1: Describe E            | ach Residence, Buildi                          | ng, Land, or    | Other Real Estate You (    | Own or Have an Interest In   |                  |   |
| 1. <b>D</b> o   | you own or ha            | ve any legal or equital                        | ble interest ir | n any residence, buildin   | g, land, or similar property?  |                  |   |
|                 | No. Go to Part           | 2.   |                 |                            |  |                  |   |
|                 | Yes. Where is            | the property?                                  |                 |                            |  |                  |   |
| Part            | 2: Describe Y            | our Vehicles                                   |                 |                            |  |                  |   |
|                 |                          |  |                 |                            | , whether they are registered or not? Ind<br>Executory Contracts and Unexpired Lease   |                  | cles you own that   |
| 3. <b>C</b> a   | ars, vans, tru           | cks, tractors, sport                           | utility vehic   | les, motorcycles           |  |                  |   |
|                 | No                       |  |                 |                            |  |                  |   |
|                 | Yes                      |  |                 |                            |  |                  |   |
|                 |                          |  |                 |                            | hicles, other vehicles, and accessories snowmobiles, motorcycle accessories  |                  |   |
|                 | No                       |  |                 |                            |  |                  |   |
|                 | Yes                      |  |                 |                            |  |                  |   |
|                 |                          |  |                 |                            | from Part 2, including any entries for   | =>               | \$0.00  |
| Part            | 3: Describe Y            | our Personal and Hou                           | sehold Items    | <b>s</b>                   |  |                  |   |
| Doy             | you own or ha            | ave any legal or equ                           | itable inter    | est in any of the follo    | owing items?   | <b>por</b><br>Do | rrent value of the tion you own? not deduct secured ms or exemptions. |
| Ε               |                          | ods and furnishings<br>or appliances, furnitu  |                 | nina, kitchenware          |  |                  |   |
|                 | Yes. Describ             | oe   |                 |                            |  |                  |   |

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

\$500.00

Miscellaneous Household Goods

Case 18-02300 Doc 1 Filed 01/26/18 Entered 01/26/18 14:23:25 Desc Main Document Page 11 of 45 Case number (if known) Debtor 1 Jimmy L Robinson Miscellaneous electronics \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 Used Personal Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$800.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes.....

□ No
■ Yes......
Institution name:

institutions. If you have multiple accounts with the same institution, list each.

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

17. Deposits of money

Case 18-02300 Doc 1 Filed 01/26/18 Entered 01/26/18 14:23:25 Desc Main Document Page 12 of 45 Case number (if known) Debtor 1 Jimmy L Robinson Checking account with Key Bank \$160.02 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: \$2,000.00 401(k) 401(k) plan through employer 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No  $\hfill \square$  Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

| Debto   | Case 18-02300 or 1 Jimmy L Robinson  | Doc 1  | Filed 01/26/18<br>Document  | Entered 01/26/2<br>Page 13 of 45   | 18 14:23:25 e number (if known) | Desc Main               |
|---|--|--|---|--|---------------------------------|-------------------------|
|   | ax refunds owed to you   |  |   |  | ,                               |                         |
|   | No   |  |   |  |                                 |                         |
|   | Yes. Give specific information a   | about them, inc  | cluding whether you alre  | ady filed the returns and th   | ne tax years                    |                         |
|   |  |  |   |  |                                 |                         |
|   |  |  |   |  |                                 |                         |
|   |  | estim  | nated 2017 tax refund   | I  | Federal                         | \$633.00                |
|   |  | · · · · · · · · · · · · · · · · · · ·  |   | <u> </u>   |                                 |                         |
|   | amily support<br>Examples: Past due or lump sum<br>No  | ı alimony, spoı  | usal support, child supp  | ort, maintenance, divorce s  | settlement, property            | settlement              |
|   | Yes. Give specific information   |  |   |  |                                 |                         |
|   |  |  |   |  |                                 |                         |
|   | ther amounts someone owes<br>Examples: Unpaid wages, disabi  | ,  | asymonts disability ban   | ofits, sick pay, vacation pa   | v workers' compan               | eation Social Socurity  |
|   | benefits; unpaid loans   |  |   | ents, sick pay, vacation pa  | y, workers comper               | Sation, Social Security |
|   | No   |  |   |  |                                 |                         |
|   | Yes. Give specific information.  |  |   |  |                                 |                         |
|   | terests in insurance policies  |  |   |  |                                 |                         |
|   | Examples: Health, disability, or li<br>No  | fe insurance; h  | nealth savings account (  | HSA); credit, homeowner's  | s, or renter's insuran          | ce                      |
|   | Yes. Name the insurance comp   | any of each n  | olicy and list its value  |  |                                 |                         |
| _   |  | npany name:  | olicy and list its value.   | Beneficiary:   |                                 | Surrender or refund     |
|   |  |  |   | •  |                                 | value:                  |
|   | Tor  | m Life Incurs  |   |  |                                 |                         |
|   | I EI   | III LIIE IIISUI <i>a</i>   | ance, no cash surrenc   | ier  |                                 |                         |
|   |  | ue thru emplo  | •   | er<br>   |                                 | \$0.00                  |
| 33. <b>C</b>                                  | ny interest in property that is f you are the beneficiary of a living someone has died.  No Yes. Give specific information.  | due you from ng trust, expec   | someone who has die<br>et proceeds from a life in   | ed surance policy, or are curr   | ·                               |                         |
| 33. <b>C</b>                                  | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  laims against third parties, when the complex is a complex in the complex in | due you from ng trust, expec   | someone who has die<br>et proceeds from a life in   | ed surance policy, or are curr   | ·                               |                         |
| 33. <b>C</b>                                  | ny interest in property that is f you are the beneficiary of a living someone has died.  No Yes. Give specific information.  claims against third parties, where the second property is a second property that is for a second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the second property in the second property is a second property in the | due you from ng trust, expec   | someone who has die<br>et proceeds from a life in   | ed surance policy, or are curr   | ·                               |                         |
| 33. <b>C</b>                                  | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  laims against third parties, where it is a many less. Accidents, employme No Yes. Describe each claim   | due you from ng trust, expect  nether or not y nt disputes, ins  | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights  | ed surance policy, or are curr it or made a demand for s to sue                          | payment                         | vive property because   |
| 33. <b>C</b>                                  | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Itaims against third parties, where items is a property of the contingent and unliquidate in the contingent and unliquidate.  | due you from ng trust, expect  nether or not y nt disputes, ins  | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights  | ed surance policy, or are curr it or made a demand for s to sue                          | payment                         | vive property because   |
| 33. <b>C</b>                                  | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Itaims against third parties, when examples: Accidents, employme No Yes. Describe each claim  | due you from ng trust, expect  nether or not y nt disputes, ins  | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights  | ed surance policy, or are curr it or made a demand for s to sue                          | payment                         | vive property because   |
| 33. <b>C</b>                                  | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Itaims against third parties, where items is a property of the contingent and unliquidate in the contingent and unliquidate.  | due you from ng trust, expect  nether or not y nt disputes, ins  | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights  | ed surance policy, or are curr it or made a demand for s to sue                          | payment                         | vive property because   |
| 33. <b>C</b> 34. <b>O</b>                     | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Itaims against third parties, when examples: Accidents, employme No Yes. Describe each claim  Intercontingent and unliquidation No Yes. Describe each claim  The contingent and unliquidation of the contingent and un                | due you from ng trust, expect  nether or not y nt disputes, ins  | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights  | ed surance policy, or are curr it or made a demand for s to sue                          | payment                         | vive property because   |
| 33. C E S S S S S S S S S S S S S S S S S S   | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Ilaims against third parties, when a samples: Accidents, employme No Yes. Describe each claim  Interest in property that is a series of a living comeon and interest in the series of a living comeon and interest in the series of a living comeon and interest in the series of a living comeon and interest in the series of a living comeon and interest in property of a living comeon and interest in property that is for a living comeon and interest in property of a living comeon and interest in property that is for a living comeon and interest in property of a living comeon and interest in prop        | due you from ng trust, expect  nether or not in t disputes, ins  ted claims of                                 | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights  | ed surance policy, or are curr it or made a demand for s to sue                          | payment                         | vive property because   |
| 33. C E S S S S S S S S S S S S S S S S S S   | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Itaims against third parties, when examples: Accidents, employme No Yes. Describe each claim  Intercontingent and unliquidation No Yes. Describe each claim  The contingent and unliquidation of the contingent and un                | due you from ng trust, expect  nether or not in t disputes, ins  ted claims of                                 | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights  | ed surance policy, or are curr it or made a demand for s to sue                          | payment                         | vive property because   |
| 33. <b>C</b> 8  34. <b>O</b> 35. <b>A</b> 36. | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Ilaims against third parties, when a samples: Accidents, employme No Yes. Describe each claim  Interest in property that is a series of a living comeon and interest in the series of a living comeon and interest in the series of a living comeon and interest in the series of a living comeon and interest in the series of a living comeon and interest in property of a living comeon and interest in property that is for a living comeon and interest in property of a living comeon and interest in property that is for a living comeon and interest in property of a living comeon and interest in prop        | due you from ng trust, expect  mether or not y nt disputes, inst  ted claims of  talready list  our entries fr | someone who has die the proceeds from a life in you have filed a lawsusurance claims, or rights every nature, including a                         | ed surance policy, or are curr it or made a demand for s to sue g counterclaims of the d | payment ebtor and rights to     | vive property because   |
| 33. <b>C</b> 8  34. <b>O</b> 35. <b>A</b> 36. | ny interest in property that is f you are the beneficiary of a living comeone has died.  No Yes. Give specific information.  Itaims against third parties, where a can be continued and the continued and the continued and the continued and the continued assets you did not yet.  Add the dollar value of all of y for Part 4. Write that number here.   | due you from ng trust, expect  nether or not y nt disputes, ins  ted claims of  ted claims of  our entries fr  | someone who has die to proceeds from a life in you have filed a lawsu surance claims, or rights every nature, including a                         | ed surance policy, or are curr it or made a demand for to sue g counterclaims of the d   | payment ebtor and rights to     | set off claims          |
| 33. C  E  34. O  35. A  36.                   | ny interest in property that is f you are the beneficiary of a living someone has died.  No Yes. Give specific information.  Itaims against third parties, where a contingent and unliquidate the contingent assets you did not the contingent assets you | due you from ng trust, expect  mether or not y nt disputes, ins  ted claims of  talready list  our entries fr  | someone who has die the proceeds from a life in you have filed a lawsu surance claims, or rights every nature, including a om Part 4, including a | ed surance policy, or are curr it or made a demand for to sue  g counterclaims of the d  | payment ebtor and rights to     | set off claims          |
| 33. C  E  34. O  35. A  36.                   | ny interest in property that is f you are the beneficiary of a living someone has died.  No Yes. Give specific information.  Itaims against third parties, where a contingent and unliquidate the contingent assets you did not the contingent assets and the contingent and the continue | due you from ng trust, expect  mether or not y nt disputes, ins  ted claims of  talready list  our entries fr  | someone who has die the proceeds from a life in you have filed a lawsu surance claims, or rights every nature, including a om Part 4, including a | ed surance policy, or are curr it or made a demand for to sue  g counterclaims of the d  | payment ebtor and rights to     | set off claims          |

Official Form 106A/B Schedule A/B: Property page 4

Case 18-02300 Entered 01/26/18 14:23:25 Doc 1 Filed 01/26/18 Desc Main Document Page 14 of 45 Case number (if known) Debtor 1 Jimmy L Robinson Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$800.00 Part 4: Total financial assets, line 36 \$2,793.02 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61.

\$3,593.02

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$3,593.02

\$3,593.02

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|   |                         | Bodanie           | 11 1 440 10 01 10 |                       |
|---|-------------------------|-------------------|-------------------|-----------------------|
| Fill in this infor                      | mation to identify your | case:             |                   |                       |
| Debtor 1                                | Jimmy L Robinson        | 1                 |                   |                       |
|   | First Name              | Middle Name       | Last Name         |                       |
| Debtor 2                                |                         |                   |                   |                       |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name         |                       |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS       |                       |
| Case number                             |                         |                   |                   |                       |
| (if known)                              |                         |                   |                   | ☐ Check if this is an |
|   |                         |                   |                   | amended filing        |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own                            | Amount of the exemption you claim Specific laws that allow exemption |
|---|---|--|
|   | Copy the value from<br>Schedule A/B                             | Check only one box for each exemption.                               |
| Miscellaneous Household Goods Line from Schedule A/B: 6.1                           | \$500.00  | \$500.00 735 ILCS 5/12-1001(b)                                       |
| Zine nom concedure 702. C. I  |   | □ 100% of fair market value, up to any applicable statutory limit    |
| Miscellaneous electronics Line from Schedule A/B: 7.1                               | \$100.00  | \$100.00 735 ILCS 5/12-1001(b)                                       |
| Elite item concedute 772.711  |   | □ 100% of fair market value, up to any applicable statutory limit    |
| Used Personal Clothing Line from Schedule A/B: 11.1                                 | \$200.00  | \$200.00 735 ILCS 5/12-1001(a)                                       |
| Ellie Holli Goriodale 775. TT. I  |   | ☐ 100% of fair market value, up to any applicable statutory limit    |
| Checking: Checking account with Key Bank  | \$160.02  | \$160.02 735 ILCS 5/12-1001(b)                                       |
| Line from <i>Schedule A/B</i> : 17.1  |   | ☐ 100% of fair market value, up to any applicable statutory limit    |
| 401(k): 401(k) plan through employer<br>Line from Schedule A/B: 21.1                | \$2,000.00  | 100% 735 ILCS 5/12-1006  |
| End from Gondale Ads. 21.1  | 100% of fair market value, up to any applicable statutory limit |  |

Case 18-02300 Doc 1 Filed 01/26/18 Entered 01/26/18 14:23:25 Desc Main Document Page 16 of 45 Jimmy L Robinson Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Federal: estimated 2017 tax refund 735 ILCS 5/12-1001(b) \$633.00 \$633.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

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| Fill in this infor  | rmation to identify your | case:             |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1            | Jimmy L Robinsor         | I<br>Middle Name  | Last Name   |  |
| Debtor 2            |                          |                   |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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|   |   | Document   | Page 18                      | 8 of 45                                       |                             |  |
|---|---|--|------------------------------|---|-----------------------------|--|
| Fill in thi                             | s information to identify your ca   | ase:   |                              |   |                             |  |
| Debtor 1                                | Jimmy L Robinson  |  |                              |   |                             |  |
|   | First Name  | Middle Name  | Last Name                    |   | <del></del>                 |  |
| Debtor 2                                |   |  |                              |   |                             |  |
| (Spouse if, f                           | iling) First Name   | Middle Name  | Last Name                    |   |                             |  |
| United St                               | ates Bankruptcy Court for the:  | NORTHERN DISTRICT OF ILI   | LINOIS                       |   |                             |  |
| Case nur                                | nher  |  |                              |   |                             |  |
| (if known)                              |   |  |                              |   |                             | heck if this is an                           |
|   |   |  |                              |   | a                           | mended filing                                |
| o                                       | LE 400E/E   |  |                              |   |                             |  |
|   | Form 106E/F   |  |                              |   |                             |  |
|   | ule E/F: Creditors Wi   |  |                              |   |                             | 12/15  |
| Schedule (<br>Schedule I<br>eft. Attach | ory contracts or unexpired leases to be secutory Contracts and Unexpirors. Creditors Who Have Claims Secuthe Continuation Page to this page case number (if known). | ed Leases (Official Form 106G). I<br>red by Property. If more space is | o not include needed, copy t | any creditors with p<br>the Part you need, fi | artially secured claims     | that are listed in tries in the boxes on the |
| Part 1:                                 | List All of Your PRIORITY Uns   | ecured Claims  |                              |   |                             |  |
| 1. Do an                                | y creditors have priority unsecured   | claims against you?  |                              |   |                             |  |
| ■ No                                    | . Go to Part 2.   |  |                              |   |                             |  |
| ☐ Ye                                    | s.  |  |                              |   |                             |  |
| Part 2:                                 | List All of Your NONPRIORITY  | Unsecured Claims   |                              |   |                             |  |
| _                                       | y creditors have nonpriority unsect b. You have nothing to report in this pact. s.  |  | your other sche              | edules.                                       |                             |  |
| unsec                                   | Il of your nonpriority unsecured clai<br>ured claim, list the creditor separately<br>one creditor holds a particular claim, lis                                     | for each claim. For each claim listed                                  | d, identify what t           | ype of claim it is. Do i                      | not list claims already inc | luded in Part 1. If more                     |
|   |   |  |                              |   |                             | Total claim                                  |
| 4.1                                     | Capital One   | Last 4 digits of acc   | ount number                  | 0567  |                             | \$618.00                                     |
|   | Ionpriority Creditor's Name   |  |                              | 0 100/07                                      |                             |  |
|   | Attn: Bankruptcy<br>Po Box 30253  | When was the debt  | incurred?                    | Opened 08/07<br>10/03/12                      | Last Active                 |  |
|   | Salt Lake City, UT 84130  | mon was the asse   | · iiioui i ou ·              | 10/00/12                                      |                             | -  |
|   | lumber Street City State Zlp Code   | As of the date you   | file, the claim i            | s: Check all that appl                        | у                           |  |
| v                                       | Who incurred the debt? Check one.   |  |                              |   |                             |  |
|   | Debtor 1 only   | ☐ Contingent   |                              |   |                             |  |
|   | Debtor 2 only   | ☐ Unliquidated   |                              |   |                             |  |
|   | Debtor 1 and Debtor 2 only  | ☐ Disputed   |                              |   |                             |  |
|   | $oldsymbol{\gimel}$ At least one of the debtors and anot  | her Type of NONPRIOR   | RITY unsecured               | d claim:                                      |                             |  |
|   | ☐ Check if this claim is for a comm   | unity Student loans  |                              |   |                             |  |
|   | ebt   |  |                              | ration agreement or o                         | divorce that you did not    |  |
| _                                       | s the claim subject to offset?  | report as priority clai  |                              |   | alle a debte                |  |
|   | No  | •  | •                            | g plans, and other sin                        | niiar debts                 |  |
|   | ☐Yes  | Other. Specify   | Credit Card                  |   |                             |  |

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| Debic   | JIIIIIIY L RODIIISOII  |  | Case number (ii know)                        |            |
|---|--|--|--|------------|
| 4.2   | City of Chicago  | Last 4 digits of account number                              | 1795   | \$150.00   |
| Nonpriority Creditor's Name<br>Bureau of Parking<br>121 N La Salle St RM 107 A<br>Chicago, IL 60602 |  | When was the debt incurred?                                  | 2016   |            |
|   | Number Street City State Zlp Code  Who incurred the debt? Check one.                       | As of the date you file, the claim                           | is: Check all that apply                     |            |
|   | Debtor 1 only  | ☐ Contingent   |  |            |
|   | Debtor 2 only  | ☐ Unliquidated   |  |            |
|   |  | ☐ Disputed   |  |            |
|   | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                     | Type of NONPRIORITY unsecure                                 | d claim:                                     |            |
|   | _  | ■ Student loans  |  |            |
|   | ☐ Check if this claim is for a community debt  Is the claim subject to offset?             | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|   | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |
|   | Yes  | Other. Specify   |  |            |
|   | 00   | tickets/fines  |  |            |
| 4.3   | Credit Acceptance  | Last 4 digits of account number                              | 4499   | \$7,909.00 |
|   | Nonpriority Creditor's Name<br>25505 West 12 Mile Rd<br>Suite 3000                         | When was the debt incurred?                                  | Opened 10/15 Last Active 3/15/16             |            |
|   | Southfield, MI 48034  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                     |            |
|   | Debtor 1 only  | ☐ Contingent   |  |            |
|   | Debtor 2 only  | ☐ Unliquidated   |  |            |
|   | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|   | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                     |            |
|   | ☐ Check if this claim is for a community   | ☐ Student loans  |  |            |
|   | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims |  |            |
|   | ■ No   | Debts to pension or profit-sharing                           |  |            |
|   | □Yes   | ■ Other. Specify Deficiency of                               | on Repossessed vehicle                       |            |
| 4.4   | ERC/Enhanced Recovery Corp   | Last 4 digits of account number                              | 1634   | \$424.00   |
|   | Nonpriority Creditor's Name<br>8014 Bayberry Rd<br>Jacksonville, FL 32256                  | When was the debt incurred?                                  | Opened 12/14                                 |            |
|   | Number Street City State Zlp Code  Who incurred the debt? Check one.                       | As of the date you file, the claim                           | is: Check all that apply                     |            |
|   | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|   | Debtor 2 only  | ☐ Unliquidated   |  |            |
|   | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|   | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                     |            |
|   | ☐ Check if this claim is for a community   | ☐ Student loans  |  |            |
|   | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|   | ■ No   | Debts to pension or profit-sharing                           | = :  |            |
|   | Yes  | Other. Specify Collection A                                  | ttorney At T                                 |            |

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| Debtor | 1 Jimmy L Robinson  |  | Case number (if know)                         |            |
|--------|---|--|---|------------|
| 4.5    | Jefferson Capital Systems, LLC Nonpriority Creditor's Name                    | Last 4 digits of account number                              | 7003  | \$1,485.00 |
|        | 16 Mcleland Rd  | When was the debt incurred?                                  | Opened 11/14                                  |            |
|        | Saint Cloud, MN 56303  Number Street City State Zlp Code                      | As of the date you file, the claim                           | is: Check all that apply                      |            |
|        | Who incurred the debt? Check one.   | , ,  | an anat appry                                 |            |
|        | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |   |            |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|        | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured                                | d claim:                                      |            |
|        | ☐ Check if this claim is for a community                                      | ☐ Student loans  |   |            |
|        | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |
|        | ■ No  | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |
|        | Yes   | ■ Other. Specify   | ompany Account Fingerhut Direct               |            |
| 4.6    | Seventh Ave   | Last 4 digits of account number                              | 384A  | \$91.00    |
|        | Nonpriority Creditor's Name   |  | Opened 12/12 Last Active                      |            |
|        | 1112 7th Ave  | When was the debt incurred?                                  | 5/17/13                                       |            |
|        | Monroe, WI 53566  Number Street City State Zlp Code                           | As of the date you file, the claim                           | is: Check all that apply                      |            |
|        | Who incurred the debt? Check one.   | no or the date you me, the claim                             | or check all that apply                       |            |
|        | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |   |            |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|        | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured                                | d claim:                                      |            |
|        | ☐ Check if this claim is for a community                                      | ☐ Student loans  |   |            |
|        | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |
|        | No  | Debts to pension or profit-sharin                            | ng plans, and other similar debts             |            |
|        | Yes   | ■ Other. Specify Charge Acc                                  |   |            |
|        |   |  |   |            |
| 4.7    | Shindler & Joyce  | Last 4 digits of account number                              | 0813  | \$0.00     |
|        | Nonpriority Creditor's Name<br>1990 E Algonquin Rd. #180<br>Chicago, IL 60632 | When was the debt incurred?                                  | 2016  |            |
|        | Number Street City State Zlp Code  Who incurred the debt? Check one.          | As of the date you file, the claim                           | is: Check all that apply                      |            |
|        | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|        | Debtor 2 only   | ☐ Unliquidated   |   |            |
|        | ☐ Debtor 1 and Debtor 2 only  | □ Disputed   |   |            |
|        | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured                                | d claim:                                      |            |
|        | ☐ Check if this claim is for a community                                      | ☐ Student loans  |   |            |
|        | debt  | Obligations arising out of a sepa                            |   |            |
|        | Is the claim subject to offset?  ■ No   | report as priority claims  Debts to pension or profit-sharin |   |            |
|        |   | ·  |   |            |
|        | Yes   | ■ Other. Specify Notice Only                                 |   |            |
|        |   |  |   |            |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Jimmy L Robinson

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                    |     |   |     | Total Claim     |
|--------------------|-----|---|-----|-----------------|
|                    | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total              |     |   |     |                 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00      |
|                    | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|                    | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|                    |     |   |     |                 |
|                    | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|                    |     |   |     |                 |
|                    |     |   |     | Total Claim     |
|                    | 6f. | Student loans   | 6f. | \$<br>150.00    |
| Total claims       |     |   |     |                 |
| from Part 2        | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|                    | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|                    | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>10,527.00 |
|                    | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>10,677.00 |
|                    | oj. | Total Notificinty. And mice of anough of.   | oj. | <br>10,677.00   |

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|   |                          | Dodanic           | TILL T GGC ZZ OT TO |  |
|---|--------------------------|-------------------|---------------------|--|
| Fill in this infor                      | rmation to identify your | case:             |                     |  |
| Debtor 1                                | Jimmy L Robinsor         | 1                 |                     |  |
|   | First Name               | Middle Name       | Last Name           |  |
| Debtor 2                                |                          |                   |                     |  |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name           |  |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF ILLINOIS         |  |
| Case number                             |                          |                   |                     |  |
| (if known)                              |                          |                   |                     |  |
|   |                          |                   |                     |  |

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| I   | Person or | company with | n whom you have the or, Street, City, State and ZIP Co | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 |           |              |  |                   |   |
|     | Name      |              |  |                   | <del>-</del>                            |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   |   |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
| 2.2 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   | <del>-</del>                            |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
| 2.3 | Oity      |              | Otato  | Zii Oodc          |   |
| 2.3 |           |              |  |                   | _                                       |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   | _                                       |
|     | Number    | Olleet       |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
| 0.1 | City      |              | State  | ZIP Code          |   |
| 2.4 |           |              |  |                   | _                                       |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     |           | <u> </u>     |  |                   | _                                       |
|     | Number    | Street       |  |                   |   |
|     |           |              |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          |   |
| 2.5 |           |              |  |                   |   |
|     | Name      |              |  |                   | <del>-</del>                            |
|     |           |              |  |                   |   |
|     |           |              |  |                   | _                                       |
|     | Number    | Street       |  |                   |   |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          |   |
|     |           |              | ·  |                   |   |

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|----------------------------------|---|---|---------------------------|--|
| Fill in this ir                  | nformation to identify your c   | ase:  |                           |  |
| Debtor 1                         | Jimmy L Robinson  |   |                           |  |
| 200101                           | First Name  | Middle Name                                       | Last Name                 |  |
| Debtor 2                         |   |   |                           |  |
| (Spouse if, filing)              | ) First Name  | Middle Name                                       | Last Name                 |  |
| United State                     | s Bankruptcy Court for the:   | NORTHERN DISTRICT                                 | OF ILLINOIS               |  |
| Case numbe                       | er  |   |                           |  |
| (if known)                       |   |   |                           | ☐ Check if this is an  |
|                                  |   |   |                           | amended filing   |
| Schedu                           |   | e also liable for any deb                         |                           | 12/15 as complete and accurate as possible. If two married   |
| ill it out, and<br>our name a    | d number the entries in the band case number (if known).  | oxes on the left. Attach<br>Answer every question | the Additional Page t     | tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write  |
| 1. Do yo                         | ou have any codebtors? (If yo   | ou are filing a joint case, o                     | do not list either spouse | e as a codebtor.   |
| ■ No<br>□ Yes                    |   |   |                           |  |
| Arizona,  No. G                  | n the last 8 years, have you be a California, Idaho, Louisiana, I Go to line 3.  Did your spouse, former spouse | Nevada, New Mexico, Pu                            | erto Rico, Texas, Wash    | ry? (Community property states and territories include ington, and Wisconsin.)   |
| in line 2<br>Form 10<br>out Colu | again as a codebtor only if<br>06D), Schedule E/F (Official I<br>umn 2.<br>Olumn 1: Your codebtor               | that person is a guaran<br>Form 106E/F), or Sched | tor or cosigner. Make     | r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Officia)6G). Use Schedule D, Schedule E/F, or Schedule G to f |
| INal                             | me, Number, Street, City, State and ZIP   | Code  |                           | Check all schedules that apply:  |
| 3.1                              |   |   |                           | ☐ Schedule D, line   |
|                                  | ame   |   |                           | ☐ Schedule E/F, line   |
|                                  |   |   |                           | ☐ Schedule G, line   |
| Nu                               | umber Street  |   |                           | _  |
| Cit                              |   | State   | ZIP Code                  |  |
|                                  |   |   |                           |  |
| 3.2                              | ame   |   |                           | Schedule D, line   |
| INC                              |   |   |                           | ☐ Schedule E/F, line   |
|                                  |   |   |                           | ☐ Schedule G, line   |
|                                  | umber Street  |   |                           |  |
| Cit                              | ty  | State   | ZIP Code                  |  |

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| Fill               | in this information to identify your c   | ase:                          |  |                       |               | 1  |                           |                              |                 |
|--------------------|--|-------------------------------|--|-----------------------|---------------|--|---------------------------|------------------------------|-----------------|
|                    | otor 1 Jimmy L Rob   |                               |  |                       |               |  |                           |                              |                 |
|                    | otor 2 ouse, if filing)  |                               |  |                       | _             |  |                           |                              |                 |
| Uni                | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC            | CT OF ILLINOIS                             |                       | _             |  |                           |                              |                 |
|                    | se number<br>  |                               | -  |                       |               | Check if this is  An amended  A supplement | ed filing<br>ent showing  |                              | chapter         |
| 0                  | fficial Form 106I  |                               |  |                       |               |  |                           | lowing date:                 |                 |
|                    | chedule I: Your Inc  | ome                           |  |                       |               | MM / DD/ Y                                 | 7 Y Y Y                   |                              | 12/15           |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment | are married and not filing wi | ng jointly, and your ith you, do not inclu | spouse i<br>de infori | s liv<br>nati | ing with you, incl<br>on about your sp     | ude inform<br>ouse. If mo | ation about<br>re space is i | your<br>needed, |
| 1.                 | Fill in your employment information.   |                               | Debtor 1                                   |                       |               | Debtor 2                                   | 2 or non-fili             | ng spouse                    |                 |
|                    | If you have more than one job,   | Employment status             | ☐ Employed                                 |                       |               | ☐ Empl                                     | oyed                      |                              |                 |
|                    | attach a separate page with information about additional   | Employment status             | ■ Not employed                             |                       |               | ☐ Not e                                    | mployed                   |                              |                 |
|                    | employers.   | Occupation                    |  |                       |               |  |                           |                              |                 |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name               |  |                       |               |  |                           |                              |                 |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address            |  |                       |               |  |                           |                              |                 |
|                    |  | How long employed t           | here?                                      |                       |               |  |                           |                              |                 |
| Par                | t 2: Give Details About Mor  | nthly Income                  |  |                       |               |  |                           |                              |                 |
|                    | mate monthly income as of the duse unless you are separated.   | ate you file this form. If    | you have nothing to r                      | eport for             | any           | line, write \$0 in the                     | space. Incl               | ude your nor                 | n-filing        |
|                    | ou or your non-filing spouse have mo<br>e space, attach a separate sheet to  |                               | ombine the informatio                      | n for all e           | mpl           | oyers for that perso                       | on on the lin             | es below. If y               | ou need         |
|                    |  |                               |  |                       |               | For Debtor 1                               | For Deb                   | tor 2 or<br>g spouse         |                 |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |                               |  | 2.                    | \$            | 0.00                                       | \$                        | N/A                          |                 |
| 3.                 | Estimate and list monthly overt  | ime pay.                      |  | 3.                    | +\$           | 0.00                                       | +\$                       | N/A                          |                 |
| 4.                 | Calculate gross Income. Add lin  | ne 2 + line 3.                |  | 4.                    | \$            | 0.00                                       | \$                        | N/A                          |                 |

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| Deb | tor 1         | Jimmy L Robinson  | _        | C  | Case        | number (if known) | _ |      |                |                    |        |
|-----|---------------|---|----------|----|-------------|-------------------|---|------|----------------|--------------------|--------|
|     |               |   |          |    | For         | Debtor 1          |   |      | Debtor :       |                    |        |
|     | Сор           | y line 4 here   | 4.       |    | \$          | 0.00              |   | \$   | innig o        | N/A                |        |
| 5.  | List          | all payroll deductions:   |          |    |             |                   |   |      |                |                    |        |
| ٥.  | 5a.           | Tax, Medicare, and Social Security deductions   | 5a       |    | \$          | 0.00              |   | \$   |                | N/A                |        |
|     | 5b.           | Mandatory contributions for retirement plans  | 5b       |    | \$<br>_     | 0.00              | - | \$—  |                | N/A                |        |
|     | 5c.           | Voluntary contributions for retirement plans  | 5c       |    | <u>\$</u> - | 0.00              | - | \$   |                | N/A                |        |
|     | 5d.           | Required repayments of retirement fund loans  | 5d       |    | \$<br>-     | 0.00              | - | \$   |                | N/A                |        |
|     | 5e.           | Insurance   | 5e       |    | <u>\$</u>   | 0.00              | - | \$   |                | N/A                |        |
|     | 5f.           | Domestic support obligations  | 5f.      |    | <u>*</u> -  | 0.00              |   | \$   |                | N/A                |        |
|     | 5g.           | Union dues  | 5g       |    | \$          | 0.00              | - | \$   |                | N/A                |        |
|     | 5h.           | Other deductions. Specify:  | 5h       |    | \$_         | 0.00              |   |      |                | N/A                |        |
| 6.  |               | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | — 6.     |    | \$          | 0.00              | - | \$   |                | N/A                |        |
| 7.  |               | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.       |    | * —<br>\$   | 0.00              | - | \$   |                | N/A                |        |
| 8.  |               | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  | 7.       |    | Ψ           | 0.00              | - | Ψ    |                | IN/A               |        |
|     |               | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |          |    |             |                   |   |      |                |                    |        |
|     |               | monthly net income.   | 8a       | ١. | \$          | 0.00              |   | \$   |                | N/A                |        |
|     | 8b.           | Interest and dividends  | 8b       |    | \$_         | 0.00              | - | \$   |                | N/A                |        |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce   |          |    | _           |                   |   |      |                |                    |        |
|     |               | settlement, and property settlement.  | 8c       |    | \$_         | 0.00              |   | \$   |                | N/A                |        |
|     | 8d.           | Unemployment compensation   | 8d       |    | \$_         | 754.00            |   | \$   |                | N/A                |        |
|     | 8e.           | Social Security   | 8e       |    | \$          | 0.00              | - | \$   |                | N/A                |        |
|     | 8f.           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  | e<br>8f. |    | \$          | 0.00              |   | \$   |                | N/A                |        |
|     | 8g.           | Pension or retirement income  | <br>8g   | ١. | \$          | 0.00              | - | \$   |                | N/A                |        |
|     | 8h.           | Other monthly income. Specify:  | 8h       |    | \$          | 0.00              | + | - \$ |                | N/A                |        |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.       | \$ | S           | 754.00            |   | \$   |                | N/A                |        |
| 10  | Calc          | culate monthly income. Add line 7 + line 9.   | 10.      | \$ |             | 754.00 + \$       |   |      | N/A            | = \$               | 754.00 |
| 10. |               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.      | Ψ_ |             | 754.00            |   |      | IN/A           | - Ψ —              | 754.00 |
| 11. | Inclu<br>othe | te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.  In the contribution of the expenses that you list in Schedule and the contribution of the expenses that you list in Schedule are not partners. The expenses that you list in Schedule are not partners are not contribution of the expenses that you list in Schedule are not partners are not partners. | depe     |    |             | •                 |   |      | chedule<br>11. |                    | 0.00   |
| 12. |               | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies   |          |    |             |                   |   |      | 12.            | \$                 | 754.00 |
| 13. | Doy           | you expect an increase or decrease within the year after you file this form   | ?        |    |             |                   |   |      |                | Combine<br>monthly |        |
|     |               | No.   |          |    |             |                   |   |      |                |                    |        |
|     |               | Yes Explain:  |          |    |             |                   |   |      |                |                    |        |

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| FilLin±             | nis information to identify y   | our case:                                     |                                      |  |                              |                                      |  |
|---------------------|---|---|--------------------------------------|--|------------------------------|--------------------------------------|--|
| Debtor 1            |   |   |                                      |  | Oh a al                      | . If the in in.                      |  |
| Debioi              | Jimmy L Rob   | oinson  |                                      |  |                              | c if this is:<br>An amended filing   |  |
| Debtor 2            |   |   |                                      |  |                              |                                      | ving postpetition chapter the following date:        |
| Spouse              | e, if filing)   |   |                                      |  |                              | 3 expenses as or                     | the following date:                                  |
| United S            | States Bankruptcy Court for the                                       | e: NORTHERN DIS                               | TRICT OF ILLIN                       | OIS  | Ī                            | MM / DD / YYYY                       |  |
| Case nu<br>(If know |   |   |                                      |  |                              |                                      |  |
|                     | cial Form 106J  | <u></u>                                       |                                      |  |                              |                                      |  |
|                     | edule J: Your   |   | arried neonle ar                     | e filing together be                               | oth are equa                 | lly responsible fo                   | 12/15  |
| inform              | ation. If more space is no<br>er (if known). Answer eve               | eeded, attach anoth                           |                                      |  |                              |                                      |  |
| Part 1:             |   | ehold   |                                      |  |                              |                                      |  |
|                     | this a joint case?  |   |                                      |  |                              |                                      |  |
|                     | No. Go to line 2. Yes. <b>Does Debtor 2 live</b>                      | in a congrate house                           | shold?                               |  |                              |                                      |  |
|                     | □ No  | in a separate nouse                           | illolu i                             |  |                              |                                      |  |
|                     |   | st file Official Form 1                       | 06J-2, <i>Expenses</i>               | s for Separate House                               | hold of Debto                | or 2.                                |  |
| 2. <b>D</b> e       | o you have dependents?  | ■ No  |                                      |  |                              |                                      |  |
| Do                  | o not list Debtor 1 and ebtor 2.                                      | ☐ Yes. Fill out thi                           | s information for endent             | Dependent's relati<br>Debtor 1 or Debtor           |                              | Dependent's age                      | Does dependent live with you?                        |
| Do                  | o not state the   |   |                                      |  |                              |                                      | □ No   |
| de                  | ependents names.  |   |                                      |  |                              |                                      | Yes  |
|                     |   |   |                                      |  |                              |                                      | □ No<br>□ Yes  |
|                     |   |   |                                      | -  |                              |                                      | ☐ Yes  |
|                     |   |   |                                      |  |                              |                                      | ☐ Yes  |
|                     |   |   |                                      |  |                              |                                      | □ No   |
|                     |   |   |                                      |  |                              |                                      | ☐ Yes  |
|                     | o your expenses include<br>openses of people other                    | than _ NO                                     |                                      |  |                              |                                      |  |
|                     | ourself and your dependent  |   |                                      |  |                              |                                      |  |
| Part 2:             | Estimate Your Ongo  | ing Monthly Expens                            | es                                   |  |                              |                                      |  |
| expens              | nte your expenses as of y<br>ses as of a date after the<br>able date. | our bankruptcy filing<br>bankruptcy is filed. | g date unless y<br>If this is a supp | ou are using this fo<br>plemental <i>Schedul</i> e | orm as a sup<br>J, check the | plement in a Cha<br>box at the top o | pter 13 case to report<br>f the form and fill in the |
|                     | e expenses paid for with<br>ue of such assistance ar                  |   |                                      |  |                              |                                      |  |
| (Officia            | al Form 106l.)  |   |                                      |  |                              | Your expe                            | enses  |
|                     | ne rental or home owners<br>ayments and any rent for th               |   | our residence.                       | nclude first mortgage                              | 4. \$                        | _                                    | 500.00   |
| If                  | not included in line 4:   |   |                                      |  |                              |                                      |  |
| 4a                  | a. Real estate taxes  |   |                                      |  | 4a. \$                       |                                      | 0.00   |
| 4b                  | 1 7   |   |                                      |  | 4b. \$                       |                                      | 0.00   |
| 40                  | •   |   |                                      |  | 4c. \$                       |                                      | 0.00   |
| 4c                  | d. Homeowner's associa<br>dditional mortgage paym                     |   |                                      | me equity loops                                    | 4d. \$<br>5. \$              |                                      | 0.00   |
| 5. <b>A</b> (       | uuitionai mortyage päym   | ients for your reside                         | nice, such as no                     | THE EQUITY TORNS                                   | ე. ა                         |                                      | U.UU   |

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| Debtor 1 Jimmy L Robins   | son  | Case num         | oer (if known) |          |
|---|--|------------------|----------------|----------|
| . Utilities:  |  |                  |                |          |
| 6a. Electricity, heat, n  | atural das   | 6a.              | \$             | 80.00    |
| 6b. Water, sewer, gar   | <u> </u>   | 6b.              | \$             | 0.00     |
|   | none, Internet, satellite, and cable services  | 6c.              | ·              | 119.00   |
|   | ione, internet, satellite, and cable services  | 6d.              | *              |          |
|   |  |                  |                | 0.00     |
| Food and housekeepir  |  | 7.               | \$             | 300.00   |
| Childcare and children  |  | 8.               | \$             | 0.00     |
| Clothing, laundry, and  | dry cleaning   | 9.               | \$             | 40.00    |
| <ol><li>Personal care product</li></ol>                               | s and services   | 10.              | \$             | 25.00    |
| <ul> <li>Medical and dental exp</li> </ul>                            | penses   | 11.              | \$             | 0.00     |
| 2. Transportation. Include  | e gas, maintenance, bus or train fare.   |                  | •              | 420.00   |
| Do not include car paym   |  | 12.              | · ·            | 130.00   |
| <ol><li>Entertainment, clubs, r</li></ol>                             | recreation, newspapers, magazines, and books   | 13.              | \$             | 100.00   |
| . Charitable contribution   | ns and religious donations   | 14.              | \$             | 100.00   |
| . Insurance.  |  |                  |                |          |
| Do not include insurance  | e deducted from your pay or included in lines 4 or 20.   |                  |                |          |
| 15a. Life insurance   | , , ,  | 15a.             | \$             | 0.00     |
| 15b. Health insurance   |  | 15b.             | \$             | 0.00     |
| 15c. Vehicle insurance  | •  | 15c.             | \$             | 0.00     |
| 15d. Other insurance.   |  | 15d.             | · ·            | 0.00     |
|   | axes deducted from your pay or included in lines 4 or 20.  | 130.             | Ψ              | 0.00     |
| Specify:  | axes deducted from your pay of included in lines 4 of 20.  | 16.              | \$             | 0.00     |
| . Installment or lease pa   | wmonte:  |                  | Ψ              | 0.00     |
| 17a. Car payments for   |  | 17a.             | ¢              | 0.00     |
|   |  |                  | :              |          |
| 17b. Car payments for   | venicle 2  | 17b.             | \$             | 0.00     |
| 17c. Other. Specify:  |  | 17c.             |                | 0.00     |
| 17d. Other. Specify:  |  | 17d.             | \$             | 0.00     |
|   | ony, maintenance, and support that you did not report  |                  | Φ.             | 0.00     |
|   | y on line 5, Schedule I, Your Income (Official Form 10   | <b>1</b> 8.      | · ·            |          |
|   | ake to support others who do not live with you.  |                  | \$             | 0.00     |
| Specify:  |  | 19.              |                |          |
|   | penses not included in lines 4 or 5 of this form or on 3   |                  |                |          |
| 20a. Mortgages on oth   | er property  | 20a.             | \$             | 0.00     |
| <ol><li>Real estate taxes</li></ol>                                   |  | 20b.             | \$             | 0.00     |
| 20c. Property, homeov   | vner's, or renter's insurance  | 20c.             | \$             | 0.00     |
| 20d. Maintenance, rep   | air, and upkeep expenses   | 20d.             | \$             | 0.00     |
| ·   | sociation or condominium dues  | 20e.             | \$             | 0.00     |
| . Other: Specify:   |  | 21.              | · -            | 0.00     |
| . Other openiy.   |  |                  | - Ψ            | 0.00     |
| 2. Calculate your monthly   | y expenses   |                  |                |          |
| 22a. Add lines 4 through  | 21.  |                  | \$             | 1,394.00 |
| 22b. Copy line 22 (mont   | hly expenses for Debtor 2), if any, from Official Form 106   | J-2              | \$             | ,        |
|   |  |                  | ·              | 1 204 00 |
| ZZC. Add lifte ZZa and Zz   | 2b. The result is your monthly expenses.   |                  | \$             | 1,394.00 |
| . Calculate your monthly  | y net income.  |                  |                |          |
|   | r combined monthly income) from Schedule I.  | 23a.             | \$             | 754.00   |
|   | y expenses from line 22c above.  | 23b.             |                | 1,394.00 |
| _ss. Copy your monum  | , 5.155.1556 HOM IIIIO 226 000VO.  | 200.             | *              | 1,007.00 |
|   |  |                  |                |          |
| 23c Subtract vour mor   | othly expenses from your monthly income  |                  |                | 0.40.00  |
|   | nthly expenses from your monthly income.   | 23c.             | \$             | -640.00  |
|   | nthly expenses from your monthly income.  monthly net income.  | 23c.             | \$             | -640.00  |
| The result is your  | monthly net income.  |                  |                | -640.00  |
| The result is your  Do you expect an incre                            |  | er you file this | form?          |          |
| The result is your  Do you expect an incre                            | monthly net income.  ease or decrease in your expenses within the year after to finish paying for your car loan within the year or do you expect | er you file this | form?          |          |
| The result is your  Do you expect an incre For example, do you expect | monthly net income.  ease or decrease in your expenses within the year after to finish paying for your car loan within the year or do you expect | er you file this | form?          |          |

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|            |                       |                          |                         |              |                    |                    | _   |   |
|------------|-----------------------|--------------------------|-------------------------|--------------|--------------------|--------------------|---|---|
| Fill in t  | his inform            | nation to identify your  | case:                   |              |                    |                    |   |   |
| Debtor     | 1                     | Jimmy L Robinson         |                         |              |                    |                    | 1   |   |
|            |                       | First Name               | Middle Name             | L            | ast Name           |                    |   |   |
| Debtor     | _                     |                          |                         |              |                    |                    |   |   |
| (Spouse if | t, filing)            | First Name               | Middle Name             | L            | ast Name           |                    |   |   |
| United \$  | States Bar            | nkruptcy Court for the:  | NORTHERN DISTRI         | CT OF ILLIN  | OIS                |                    |   |   |
| Cooo ni    | umbor                 |                          |                         |              |                    |                    |   |   |
| (if known) |                       |                          |                         |              |                    |                    | ☐ Check if this is an   |   |
|            |                       |                          |                         |              |                    |                    | amended filing  |   |
|            |                       |                          |                         |              |                    |                    |   |   |
|            |                       |                          |                         |              |                    |                    |   |   |
| Officia    | al Form               | n 106Dec                 |                         |              |                    |                    |   |   |
| Dec        | larati                | ion About a              | n Individua             | al Debi      | tor's Sch          | edules             | 12/15   |   |
|            |                       |                          |                         |              |                    |                    |   | _ |
| If two m   | arried pe             | ople are filing together | r, both are equally res | ponsible for | supplying corre    | ct information.    |   |   |
| V          | -4 <b>6</b> : - 4 -:- | . f =                    |                         |              |                    |                    |   |   |
|            |                       |                          |                         |              |                    |                    | atement, concealing property, or 000, or imprisonment for up to 20          |   |
|            |                       | 3 U.S.C. §§ 152, 1341, 1 |                         |              |                    |                    | ээ, эт нэрэээ   |   |
|            |                       |                          |                         |              |                    |                    |   |   |
|            |                       |                          |                         |              |                    |                    |   |   |
|            | Sign                  | Below                    |                         |              |                    |                    |   |   |
|            |                       | _                        |                         |              |                    |                    |   |   |
| Di         | d you pay             | or agree to pay some     | one who is NOT an at    | torney to he | p you fill out bar | nkruptcy forms?    |   |   |
| _          | No                    |                          |                         |              |                    |                    |   |   |
| _          |                       |                          |                         |              |                    |                    |   |   |
|            | Yes. N                | lame of person           |                         |              |                    |                    | ankruptcy Petition Preparer's Notice, on, and Signature (Official Form 119) |   |
|            |                       |                          |                         |              |                    | Declaratio         | on, and Signature (Official Form 119)                                       |   |
|            |                       |                          |                         |              |                    |                    |   |   |
|            |                       | ty of perjury, I declare | that I have read the su | ımmary and   | schedules filed    | with this declarat | tion and  |   |
| tna        | it they are           | true and correct.        |                         |              |                    |                    |   |   |
| X          | /s/ Jimm              | ny L Robinson            |                         | X            |                    |                    |   |   |
|            |                       | Robinson                 |                         |              | Signature of De    | ebtor 2            |   |   |
|            | Signature             | e of Debtor 1            |                         |              |                    |                    |   |   |
|            | Date J                | anuary 26, 2018          |                         |              | Date               |                    |   |   |
|            | 24.0                  | andary 20, 2010          |                         |              |                    |                    |   | _ |

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| Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property)   |                   |                   |                                  |                                |                                 |                             |                    |
|--|-------------------|-------------------|----------------------------------|--------------------------------|---------------------------------|-----------------------------|--------------------|
| Debtor 2   Geouse It, filting)   First Name   Middle Name   Last Name  | Fill              | in this inform    | nation to identify your          | case:                          |                                 |                             |                    |
| Debtor 2  Green Inling   | De                | btor 1            |                                  |                                |                                 |                             |                    |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS    Check if this is an amended filing  | Do                | htor 2            | First Name                       | Middle Name                    | Last Name                       |                             |                    |
| Case number   Check if this is an amended filling    Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy    Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married  |                   |                   | First Name                       | Middle Name                    | Last Name                       |                             |                    |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not marrie | Un                | ited States Bar   | nkruptcy Court for the:          | NORTHERN DISTRICT (            | OF ILLINOIS                     |                             |                    |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  No warried  No warried  No warried  No befor 1 Prior Address:  Dates Debtor 1 Debtor 2 Prior Address:  Dates Debtor 1 Prior Address:  Dates Debtor 1 Prior Address:  Dates Debtor 1 Debtor 2 Prior Address:  Dates Debtor 2 lived there  No warried Arrizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  Debtor 1  Sources of income Check all that apply.  Check all that apply.  Check all that apply.  Every and the defaults.  Debtor 2  Sources of income Check all that apply.  Check all that apply.  Bonuses, lips  Wages, commissions, bonuses, lips   | Ca                | se number         |                                  |                                |                                 |                             |                    |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more raised and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more raised and accurate as possible. If two married search as a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married  | (if kı            | nown)             |                                  |                                |                                 | _                           |                    |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before   |                   |                   |                                  |                                |                                 |                             | menaca ming        |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before   | $\frown$ f        | ficial Ear        | rm 107                           |                                |                                 |                             |                    |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married  2. During the last 3 years, have you lived anywhere other than where you live now?    No   |                   |                   |                                  | Affaira far Individ            | duala Filina far D              | on leve up to v             |                    |
| Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before  |                   |                   |                                  |                                |                                 |                             |                    |
| Married   Not    |                   |                   |                                  |                                |                                 |                             |                    |
| Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 5 Sources of income Check all that apply. Debtor 6 Debtor 7 Sources of income Check all that apply. Debtor 8 Debtor 9 Debtor 9 Debtor 9 Debto |                   |                   | •                                | •                              | and forms on the top of any     | additional pagoo, write you | ii name ana cacc   |
| Married   Not married  | Pa                | rt 1: Give D      | etails About Your Ma             | rital Status and Where You     | Lived Before                    |                             |                    |
| During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Ilived there  Debtor 2 Prior Address: Dates Debtor 2 Ilived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income Check all that apply.  Gross income Check all that apply.  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  | 1.                | What is your      | current marital statu            | s?                             |                                 |                             |                    |
| During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Ilived there  Debtor 2 Prior Address: Dates Debtor 2 Ilived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income Check all that apply.  Gross income Check all that apply.  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  |                   | □ Morried         |                                  |                                |                                 |                             |                    |
| ■ No   |                   | _                 | ried                             |                                |                                 |                             |                    |
| Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 5   Debtor 5   Debtor 5   Debtor 6   Debtor 6   Debtor 6   Debtor 6   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 8   Debtor 9   | 2.                | During the la     | ast 3 years, have you            | lived anywhere other than      | where you live now?             |                             |                    |
| Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 5   Debtor 5   Debtor 5   Debtor 6   Debtor 6   Debtor 6   Debtor 6   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 8   Debtor 9   |                   | ■ No              |                                  |                                |                                 |                             |                    |
| lived there   lived there   lived there   lived there   lived there   lived there  |                   | _                 | t all of the places you li       | ved in the last 3 years. Do no | ot include where you live now   |                             |                    |
| Mithin the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips   |                   | Debtor 1 Pr       | ior Address:                     |                                | Debtor 2 Prior Ad               | dress:                      |                    |
| No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No Ves. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  | _                 | 140011 41 1       |                                  |                                |                                 |                             |                    |
| Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips   | <b>3.</b><br>stat |                   |                                  |                                |                                 |                             |                    |
| Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips   |                   |                   |                                  |                                |                                 |                             |                    |
| Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  No  Pebtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips   |                   | _                 | ko suro vou fill out Sch         | andula H: Vour Cadabtars (Ot   | fficial Form 106H)              |                             |                    |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Check all that apply.  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  Debtor 2  Sources of income Check all that apply.  Check all that apply.  Wages, commissions, bonuses, tips  |                   |                   | ke sure you iiii out <i>scri</i> | ledule H. Your Codebiors (Or   | iliciai Foitii 100H).           |                             |                    |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  Debtor 2  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  \$12,794.69  Wages, commissions, bonuses, tips   | Pa                | t 2 Explai        | n the Sources of You             | r Income                       |                                 |                             |                    |
| Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$12,794.69  Wages, commissions, bonuses, tips  | 4.                | Fill in the tota  | l amount of income you           | u received from all jobs and a | all businesses, including part- | time activities.            | ndar years?        |
| Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$12,794.69  Wages, commissions, bonuses, tips  |                   | □ Na              |                                  |                                |                                 |                             |                    |
| Debtor 1 Sources of income Check all that apply.  For last calendar year: (January 1 to December 31, 2017)  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Sources of income (before deductions and exclusions)  Wages, commissions, bonuses, tips  |                   |                   | in the details                   |                                |                                 |                             |                    |
| Sources of income Check all that apply.  Gross income (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$12,794.69  Wages, commissions, bonuses, tips  |                   | <b>—</b> 163.1111 | in the details.                  |                                |                                 |                             |                    |
| Check all that apply.  Check all that apply.  (before deductions and exclusions)  Check all that apply.  Check all that apply.  (before deductions and exclusions)  For last calendar year: (January 1 to December 31, 2017)  Wages, commissions, bonuses, tips  \$12,794.69  Uwages, commissions, bonuses, tips   |                   |                   |                                  |                                |                                 |                             |                    |
| (January 1 to December 31, 2017)  bonuses, tips  bonuses, tips   |                   |                   |                                  |                                | (before deductions and          |                             | (before deductions |
| bondoo, ape  |                   |                   |                                  | _                              | \$12,794.69                     | _                           |                    |
|  |                   |                   |                                  | • •                            |                                 | ☐ Operating a business      |                    |

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|            |  |   |  | Debtor 1  |                      |  | Debtor 2   |                            |   |
|------------|--|---|--|---|----------------------|--|--|----------------------------|---|
|            |  |   |  | Sources of income<br>Check all that apply.  | (befo                | ss income<br>ore deductions and<br>usions)                       | Sources of inc<br>Check all that a                               |                            | Gross income<br>(before deductions<br>and exclusions) |
|            |  | dar year bef<br>December 3                        |  | ■ Wages, commissions, bonuses, tips   |                      | \$19,044.00  | ☐ Wages, com bonuses, tips                                       | missions,                  |   |
|            |  |   |  | ☐ Operating a business  |                      |  | ☐ Operating a  | business                   |   |
| For<br>(Ja | the calen  | dar year:<br>December 3                           | 31, 2015 )   | ■ Wages, commissions, bonuses, tips   |                      | \$20,049.00  | ☐ Wages, com bonuses, tips                                       |                            |   |
|            |  |   |  | ☐ Operating a business  |                      |  | ☐ Operating a  | business                   |   |
| 5.         | Include include include and other winnings.  List each s | come regardl<br>public benefi<br>If you are filir | ess of wheth<br>t payments;<br>ng a joint cas<br>ne gross inco | e during this year or the two<br>er that income is taxable. Ex-<br>pensions; rental income; inte-<br>e and you have income that y<br>me from each source separa | amples or rest; divi | of other income are a dends; money collectived together, list it | alimony; child supp<br>cted from lawsuits;<br>only once under De | royalties; and<br>ebtor 1. |   |
|            |  |   |  | Debtor 1  |                      |  | Debtor 2   |                            |   |
|            |  |   |  | Sources of income<br>Describe below.  | each<br>(befo        | ss income from<br>a source<br>ore deductions and<br>usions)      | Sources of inc<br>Describe below                                 |                            | Gross income<br>(before deductions<br>and exclusions) |
|            |  | / 1 of curren<br>filed for ban                    |  | Unemployment  |                      | \$410.00   |  |                            |   |
|            | last calen   | dar year:<br>December 3                           | 31, 2017 )   | Unemployment  |                      | \$2,870.00   |  |                            |   |
| Par        | † 3: List  | Certain Pay                                       | ments You  | Made Before You Filed for   | Bankru               | ntcv   |  |                            |   |
|            | 2.0.   | · oortaiii a                                      | monto rou  | inado Bololo Tod I nod lo.  | <u> Dumini u</u>     | proj   |  |                            |   |
| 6.         | Are either No.   | Neither De  | btor 1 nor D   | s debts primarily consume<br>ebtor 2 has primarily consu<br>personal, family, or househo  | umer de              | bts. Consumer deb  | ts are defined in 11   | U.S.C. § 10                | 1(8) as "incurred by an                               |
|            |  | During the  | 90 days befo   | re you filed for bankruptcy, di   | id you p             | ay any creditor a tota   | al of \$6,425* or moi  | re?                        |   |
|            |  | □ No.   | Go to line 7   |   |                      |  |  |                            |   |
|            |  | Yes   | paid that cre<br>not include                                   | ach creditor to whom you pai<br>ditor. Do not include paymer<br>payments to an attorney for t<br>on 4/01/19 and every 3 year                                    | nts for denis        | omestic support obli<br>ruptcy case.                             | gations, such as ch  | ild support a              | ind alimony. Also, do                                 |
|            | Yes.   | Debtor 1 o  | r Debtor 2 o   | r both have primarily consure you filed for bankruptcy, di  | umer de              | bts.   |  | ,                          |   |
|            |  | ■ No.   | Go to line 7   |   |                      |  |  |                            |   |
|            |  | □ Yes   | include pay  | ach creditor to whom you pa<br>ments for domestic support o<br>this bankruptcy case.  |                      |  |  |                            |   |
|            | Creditor'  | 's Name and                                       | Address  | Dates of payme  | ent                  | Total amount paid  | Amount you still owe   | Was this p                 | payment for   |

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| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No  Yes. List all payments to an insider. |                         |   |                      |                                 |                       |  |  |  |
|-----|---|-------------------------|---|----------------------|---------------------------------|-----------------------|--|--|--|
|     | Insider's Name and Address  | Dates of payment        | Total amount paid                                   | Amount you still owe | Reason for t                    | his payment           |  |  |  |
| 8.  | Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider   |                         | ments or transfer a                                 | any property on a    | ccount of a del                 | ot that benefited an  |  |  |  |
|     | Insider's Name and Address  | Dates of payment        | Total amount paid                                   | Amount you still owe | Reason for to<br>Include credit |                       |  |  |  |
| Par | t 4: Identify Legal Actions, Repossession   | ns, and Foreclosures    |   |                      |                                 |                       |  |  |  |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.   |                         |   |                      |                                 |                       |  |  |  |
|     | Case title Case number  | Nature of the case      | Court or agency                                     |                      | Status of the                   | case                  |  |  |  |
|     | Credit Acceptance v Debtor<br>16-m1-120813  | collection              | Circuit Court of<br>Daley Center<br>Chicago, IL 606 | ·                    | ■ Pending □ On appea □ Conclude |                       |  |  |  |
| 10. | Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  |                         | erty repossessed, f                                 | oreclosed, garnis    | shed, attached,                 | seized, or levied?    |  |  |  |
|     | Creditor Name and Address   | Describe the Property   |   | Date                 |                                 | Value of the property |  |  |  |
|     |   | Explain what happened   | d   |                      |                                 |                       |  |  |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No  Yes. Fill in the details.  |                         | luding a bank or fir                                | nancial institution  | n, set off any ar               | nounts from your      |  |  |  |
|     | Creditor Name and Address   | Describe the action the | e creditor took                                     | Date taker           | action was<br>า                 | Amount                |  |  |  |
| 12. | Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a  ■ No □ Yes  |                         | erty in the possessi                                | ion of an assigne    | e for the benef                 | it of creditors, a    |  |  |  |

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| Pa  | rt 5: List Certain Gifts and Contributions   | i      |  |   |                           |
|-----|--|--------|--|---|---------------------------|
| 13. | Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.   | ptcy,  | did you give any gifts with a total value of more t  | han \$600 per person                    | ?                         |
|     | Gifts with a total value of more than \$600 per person   |        | Describe the gifts   | Dates you gave the gifts                | Value                     |
|     | Person to Whom You Gave the Gift and Address:  |        |  |   |                           |
| 14. | Within 2 years before you filed for bankru  ■ No  □ Yes. Fill in the details for each gift or co                                       |        | did you give any gifts or contributions with a totation.   | al value of more than                   | \$600 to any charity?     |
|     | Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code) | tal    | Describe what you contributed  | Dates you contributed                   | Value                     |
| Pa  | rt 6: List Certain Losses  |        |  |   |                           |
| 15. | Within 1 year before you filed for bankrup or gambling?  ■ No □ Yes. Fill in the details.  | tcy or | r since you filed for bankruptcy, did you lose any   | thing because of the                    | ft, fire, other disaster, |
|     | Describe the property you lost and how the loss occurred   | nclud  | ribe any insurance coverage for the loss<br>e the amount that insurance has paid. List pending<br>nce claims on line 33 of Schedule A/B: Property. | Date of your loss                       | Value of property lost    |
| Pa  | rt 7: List Certain Payments or Transfers   |        |  |   |                           |
| 16. | consulted about seeking bankruptcy or p  | repari | lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required             |   | rty to anyone you         |
|     | □ No ■ Yes. Fill in the details.   |        |  |   |                           |
|     | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo  | ou     | Description and value of any property transferred  | Date payment or transfer was made       | Amount of payment         |
|     | Leeders & Associates<br>205 W. Randolph St.<br>Suite 1240<br>Chicago, IL 60606<br>tleeders@leederslaw.com                              |        | Attorney Fees  | 11/2016-5/201<br>7                      | \$900.00                  |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y     | tors o |  | or transfer any prope                   | erty to anyone who        |
|     | ■ No □ Yes. Fill in the details.   |        |  |   |                           |
|     | Person Who Was Paid<br>Address   |        | Description and value of any property transferred  | Date payment<br>or transfer was<br>made | Amount of payment         |

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| 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Discourse include gifts and transfers that you have already listed on this statement. |   |  |                            |              |   |  |   |
|--|---|--|----------------------------|--------------|---|--|---|
|  | ■ No □ Yes. Fill in the details.  |  |                            |              |   |  |   |
|  | Person Who Received Transfer Address  | Description and v  |                            |              | ibe any property or<br>ents received or debts                 | Date transfer was made                       |   |
|  | Person's relationship to you  | property management  |                            |              | n exchange  |  |   |
| 19.  | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro                           |  | ny property to a           | self-settle  | d trust or similar device                                     | of which you are a                           |   |
|  | No Ves Fill in the details  |  |                            |              |   |  |   |
|  | ☐ Yes. Fill in the details.  Name of trust  | Description and v  | value of the pro           | nerty trans  | ferred  | Date Transfer was                            | • |
|  | Name of trast   | Description and t  | raide of the pro           | porty trails | iciica  | made   | • |
| Pa   | rt 8: List of Certain Financial Accounts, In  | struments, Safe Deposi   | t Boxes, and St            | orage Unit   | s   |  |   |
| 20.  | Within 1 year before you filed for bankrupto  | cv. were any financial ac  | counts or instr            | uments he    | ld in vour name. or for v                                     | our benefit. closed.                         |   |
| _0.  | sold, moved, or transferred?<br>Include checking, savings, money market,<br>houses, pension funds, cooperatives, asso | or other financial accou   | nts; certificates          | of deposit   |   |  |   |
|  | ■ No  |  |                            | ·            |   |  |   |
|  | Yes. Fill in the details.   |  |                            |              |   |  |   |
|  | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)                                  | Last 4 digits of account number  | Type of account instrument | unt or       | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing of<br>transfe | r |
| 21.  | Do you now have, or did you have within 1 cash, or other valuables?   | year before you filed for  | r bankruptcy, ar           | ny safe dep  | posit box or other depos                                      | itory for securities,                        |   |
|  | ■ No □ Yes. Fill in the details.  |  |                            |              |   |  |   |
|  | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)                                   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)            |                            | Describe     | the contents  | Do you still have it?                        |   |
| 22.  | Have you stored property in a storage unit  | or place other than your   | home within 1              | year befor   | e you filed for bankrupte                                     | cy?  |   |
|  | ■ No □ Yes. Fill in the details.  |  |                            |              |   |  |   |
|  | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or I<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                            | Describe     | the contents  | Do you still have it?                        |   |
| Pai  | rt 9: Identify Property You Hold or Control   | I for Someone Else   |                            |              |   |  |   |
| 23.  |   |  | ude any proper             | ty you borr  | rowed from, are storing                                       | for, or hold in trust                        |   |
|  | ■ No □ Yes. Fill in the details.  |  |                            |              |   |  |   |
|  | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prop<br>(Number, Street, City, S<br>Code)                   |                            | Describe     | the property  | Value  | 9 |
| Par  | rt 10: Give Details About Environmental Inf   |  |                            |              |   |  |   |
|  |   |  |                            |              |   |  |   |
| For  | the purpose of Part 10, the following definiti  | ions apply:  |                            |              |   |  |   |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance

|     | haz                    | ardous material, pollutant, contaminant,   | or similar term.  |           | ,  | ,                  |
|-----|------------------------|--|---|-----------|--|--------------------|
| Rep | ort a                  | III notices, releases, and proceedings tha   | at you know about, regardless of when                                     | the       | ey occurred.   |                    |
| 24. | Has                    | any governmental unit notified you that  | you may be liable or potentially liable                                   | uno       | der or in violation of an environme                                | ntal law?          |
|     |                        | No   |   |           |  |                    |
|     |                        | Yes. Fill in the details.  |   |           |  |                    |
|     |                        | me of site<br>dress (Number, Street, City, State and ZIP Code)                       | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | d         | Environmental law, if you know it                                  | Date of notice     |
| 25. | Hav                    | e you notified any governmental unit of  | any release of hazardous material?  |           |  |                    |
|     |                        | No<br>Yes. Fill in the details.  |   |           |  |                    |
|     |                        | me of site<br>dress (Number, Street, City, State and ZIP Code)                       | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | d         | Environmental law, if you know it                                  | Date of notice     |
| 26. | Hav                    | re you been a party in any judicial or adm   | ninistrative proceeding under any envi                                    | ron       | mental law? Include settlements a                                  | nd orders.         |
|     |                        | No   |   |           |  |                    |
|     |                        | Yes. Fill in the details.  |   |           |  |                    |
|     | Case Title Case Number |  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Na        | ture of the case   | Status of the case |
| Par | t 11:                  | Give Details About Your Business or (  | Connections to Any Business   |           |  |                    |
| 27. | Wit                    | hin 4 years before you filed for bankrupt  | cv. did vou own a business or have ar                                     | ıv of     | f the following connections to any                                 | business?          |
|     |                        | ☐ A sole proprietor or self-employed in  |   | -         |  |                    |
|     |                        | ☐ A member of a limited liability comp   | any (LLC) or limited liability partnersh                                  | ip (L     | _LP)   |                    |
|     |                        | ☐ A partner in a partnership   |   |           |  |                    |
|     |                        | ☐ An officer, director, or managing exe  | ecutive of a corporation  |           |  |                    |
|     |                        | ☐ An owner of at least 5% of the voting  | g or equity securities of a corporation                                   |           |  |                    |
|     |                        | No. None of the above applies. Go to P   | art 12.   |           |  |                    |
|     |                        | Yes. Check all that apply above and fill   | in the details below for each business                                    | <b>S.</b> |  |                    |
|     |                        | siness Name<br>dress   | Describe the nature of the business                                       |           | Employer Identification number<br>Do not include Social Security r |                    |
|     |                        | mber, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper  |           |  | iumber of friin.   |
| 28. |                        | hin 2 years before you filed for bankrupt<br>citutions, creditors, or other parties. | cy, did you give a financial statement                                    | to aı     | Dates business existed nyone about your business? Inclu            | de all financial   |
|     |                        | No   |   |           |  |                    |
|     |                        | Yes. Fill in the details below.  |   |           |  |                    |
|     | Ad                     | me<br>dress<br>mber, Street, City, State and ZIP Code)                               | Date Issued   |           |  |                    |

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Case number (# known) Document

Debtor 1 Jimmy L Robinson

| Part 12: Sign Below                           |   |   |
|---|---|---|
| are true and correct. I understand that makin |   | declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both. |
| /s/ Jimmy L Robinson                          |   |   |
| Jimmy L Robinson                              | Signature of Debtor 2                               |   |
| Signature of Debtor 1                         | -   |   |
| Date January 26, 2018                         | Date  |   |
| Did you attach additional pages to Your State | ement of Financial Affairs for Individuals Filing   | g for Bankruptcy (Official Form 107)?   |
| No  |   |   |
| □ Yes   |   |   |
| Did you pay or agree to pay someone who is    | not an attorney to help you fill out bankruptcy     | y forms?  |
| No  |   |   |
| Yes. Name of Person Attach the Bar            | nkruptcy Petition Preparer's Notice, Declaration, a | and Signature (Official Form 119).  |

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| Fill in this inform   | nation to identify your  | case:   |   |  |
|---|--|---|---|--|
| Debtor 1  | Jimmy L Robinson   |   |   |  |
|   | First Name   | Middle Name   | Last Name   |  |
| Debtor 2<br>(Spouse if, filing)   | First Name   | Middle Name   | Last Name   |  |
| United States Bar   | nkruptcy Court for the:  | NORTHERN DIST   | RICT OF ILLINOIS  |  |
| Case number   |  |   |   | ☐ Check if this is an amended filing                                   |
| Official For  |  | n for Indiv   | iduals Filing Under Chap  | oter 7 12/15   |
|   |  |   |   | 12.0   |
| whicher on the formal two married per sign and the as complete a write you part 1: List You. For any creditor | ver is earlier, unless thorm  ople are filing together d date the form.  Ind accurate as possibour name and case number of the form that the form the form that the form that the form that the form the form that the form that the form | e court extends the in a joint case, both le. If more space is aber (if known). | you file your bankruptcy petition or by the date time for cause. You must also send copies to the are equally responsible for supplying corresponded, attach a separate sheet to this form. | ect information. Both debtors must On the top of any additional pages, |
| information be  | low.<br>ditor and the property tl  | nat is collateral   | What do you intend to do with the property secures a debt?  | that Did you claim the property as exempt on Schedule C?               |
|   |  |   |   |  |
| Creditor's  |  |   | ☐ Surrender the property.   | □ No   |
| name:   |  |   | Retain the property and redeem it.  | □Yes   |
| Description of  |  |   | Retain the property and enter into a  | □ res  |
| property  |  |   | Reaffirmation Agreement.  Retain the property and [explain]:  |  |
| securing debt:  |  |   | - Netalli tile property allu [explaili].  |  |
|   |  |   |   |  |

Official Form 108

Creditor's

name:

property

Creditor's

name:

property

Description of

securing debt:

Description of

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 $\square$  Surrender the property.

 $\hfill\square$  Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Surrender the property.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 $\square$  Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Yes

□ No

☐ Yes

□ No

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| Debtor 1               | Jimmy L Robinson   | Case number (if  | known)                                  |
|------------------------|--|--|---|
| name:                  |  | ☐ Retain the property and redeem it.☐ Retain the property and enter into a   | ☐ Yes                                   |
| Descri                 | ption of   | Reaffirmation Agreement.   |   |
| proper                 |  | ☐ Retain the property and [explain]:   |   |
| securir                | ng debt:   |  |   |
| Part 2:                | List Your Unexpired Personal Property  | / Leases   |   |
| n the info             | ormation below. Do not list real estate le   | you listed in Schedule G: Executory Contracts and Une<br>eases. Unexpired leases are leases that are still in effect<br>by lease if the trustee does not assume it. 11 U.S.C. § 36 | ct; the lease period has not yet ended. |
| Describe               | your unexpired personal property leas  | es   | Will the lease be assumed?              |
| Lessor's               |  |  | □ No                                    |
| Description Property:  | on of leased   |  | ☐ Yes                                   |
| Lessor's               | name:  |  | □ No                                    |
| Description            | on of leased   |  |   |
| Property:              |  |  | ☐ Yes                                   |
| Lessor's               |  |  | □ No                                    |
| Description Property:  | on of leased   |  | ☐ Yes                                   |
| Lessor's               | name:  |  | □ No                                    |
| Description            | on of leased   |  |   |
| Property:              |  |  | ☐ Yes                                   |
| Lessor's               |  |  | □ No                                    |
| Property:              | on of leased   |  | ☐ Yes                                   |
| Lessor's               |  |  | □ No                                    |
| Description  Property: | on of leased   |  | ☐ Yes                                   |
| Lessor's               | name:  |  | □ No                                    |
|                        | on of leased   |  |   |
| , ,                    |  |  | ☐ Yes                                   |
| Part 3:                | Sign Below   |  | not occurred a debt and any negocial    |
|                        | naity of perjury, I declare that I have ind that is subject to an unexpired lease. | licated my intention about any property of my estate th  | ial secures a debt and any personal     |
|                        | Jimmy L Robinson   | X Signature of Debtor 2  |   |
|                        | my L Robinson<br>nature of Debtor 1  | Signature of Debtor 2  |   |
| Date                   | 9 January 26, 2018   | Date   |   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-02300 Doc 1 Filed 01/26/18 Entered 01/26/18 14:23:25 Desc Main Document Page 42 of 45

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Jimmy L Robinson  | 2 102 022 02 2220 02 22220 02           | Case No            | ).                         |              |
|-------|---|---|--------------------|----------------------------|--------------|
|       |   | Debtor(s)                               | Chapter            | 7                          |              |
|       | DISCLOSURE OF COMI  | PENSATION OF ATTOR                      | NEY FOR I          | DEBTOR(S)                  |              |
| (     | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the per rendered on behalf of the debtor(s) in contemplation   | filing of the petition in bankruptcy,   | or agreed to be pa | id to me, for services rer | ndered or to |
|       | For legal services, I have agreed to accept   |   | \$                 | 900.00                     |              |
|       | Prior to the filing of this statement I have receive  | ved                                     | \$                 | 900.00                     |              |
|       | Balance Due   |   |                    | 0.00                       |              |
| 2. 7  | The source of the compensation paid to me was:  |   |                    |                            |              |
|       | ■ Debtor □ Other (specify):   |   |                    |                            |              |
| 3.    | The source of compensation to be paid to me is:   |   |                    |                            |              |
|       | ■ Debtor □ Other (specify):   |   |                    |                            |              |
| 4.    | ■ I have not agreed to share the above-disclosed co   | ompensation with any other person t     | unless they are me | mbers and associates of    | my law firm. |
|       | ☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the  |   |                    |                            | w firm. A    |
| 5.    | In return for the above-disclosed fee, I have agreed  | to render legal service for all aspects | of the bankruptc   | y case, including:         |              |
| l     | a. Analysis of the debtor's financial situation, and ro<br>b. Preparation and filing of any petition, schedules,<br>c. Representation of the debtor at the meeting of cro<br>d. [Other provisions as needed]<br>Exemption planning;   | statement of affairs and plan which     | may be required;   | -                          | uptcy;       |
| 6. ]  | By agreement with the debtor(s), the above-disclosed Representation of chapter 7 debtors for a. Dischargeability actions /adversary a b. Judicial lien avoidances; c. Relief from automatic stay actions; d. Avoidance of liens pursuant to 11 US e. Secured debt redemption motions; f. Any other adversary proceedings. | r any of the following:<br>actions;     |                    |                            |              |
|       |   | CERTIFICATION                           |                    |                            |              |
|       | I certify that the foregoing is a complete statement of ankruptcy proceeding.   | f any agreement or arrangement for      | payment to me fo   | r representation of the de | ebtor(s) in  |
| ls    | anuary 26, 2018   | /s/ Terrance S. Lee                     | ders               |                            |              |
|       | ate   | Terrance S. Leede                       |                    |                            |              |
|       |   | Signature of Attorney                   |                    |                            |              |
|       |   | Leeders & Associa<br>205 W. Randolph S  |                    |                            |              |
|       |   | Suite 1401                              | λ.                 |                            |              |
|       |   | Chicago, IL 60606                       |                    |                            |              |

312-346-7400 Fax: 312-346-7401

tleeders@leederslaw.com

Name of law firm

CHAPTER 7 BANKRUPTCY CONTRACT

| SECURED DEBTS  1st Mortgage /Arrears  2nd Mortgage /Arrears  Automobile #1  Automobile #2  PMSI  Non-PMSI  Other  TOTAL \$ | UNSECURED DEBTS  TOPAL S   | NON-DISCHARGEABLE DEBTS Taxes Student Loans Child Support NSF Parking Tickets Overpay Gov't. Debt Other TOTAL S |  |  |
|--|--|---|--|--|
| Cosigned debt (Y/N) Wage assignment (Y/N) 722 Redemption (Y/N)   | Bank Account Setoff (Y/N)  License suspended (Y/N)  Motion to avoid lien (Y/N) | Garnishment (Y/N) IRS Determination (Y/N) Judgment lien motion (Y/N)  |  |  |

### ALL PAYMENTS ARE TO BE MADE PAYABLE TO "LEEDERS & ASSOCIATES"

THE FEE BELOW <u>DOES NOT</u> INCLUDE FEES FOR MANDATORY CREDIT COUNSELING OR DEBTOR EDUCATION REQUIREMENTS; THIRD PARTY FEES FOR APPRAISALS, CREDIT REPORTS, TAX TRANSCRIPTS, TITLE SEARCHES, AND OTHER REQUIRED DUE DILLIGENCE REQUIREMENTS. FILING FEE IS A SEPARATE FEE FROM THE ATTORNEYS FEES, AND MUST BE PAID BEFORE CASE IS FILED.

## CHAPTER 7 ATTORNEYS FEES

Flat Fee: \$ 9

-\$306.00 court filing fee

THE BANKRUPTCY WILL NOT BE FILED UNTIL ATTORNEYS FEES AND COSTS ARE PAID IN FULL AND ALL REQUIRED DOCUMENTS ARE RECEIVED BY THE ATTORNEYS.

RETAINER: INITIAL RETAINER paid is an <u>ADVANCED PAYMENT RETAINER</u>. This is a present payment to Leeders & Associates in exchange for the commitment to provide legal services in the future. Ownership of this retainer passes to the lawyer immediately upon payment and is deposited in Leeders & Associates business account. However, if the representation ends before the retainer has been exhausted, the retainer is subject to refund under Rules 1.15(b), 1.16(d) and 1.16(d) of the Rules of Professional Conduct. You have the option to place the retainer into a security retainer, and must request this at the time the contract is signed, and this choice is yours alone. The purpose of the advanced payment retainer is to secure sufficient funds out of the reach of seizure in order to hire counsel.

Client Acceptance: initial:

### CLIENT AND ATTORNEY AGREE TO THE FOLLOWING:

1) FULL DISCLOSURE & PRODUCTION OF DOCUMENTS - Client agrees to fully disclose all financial information to LEEDERS & ASSOCIATES, (hereinafter "LEEDERS") and understands that it is a Federal crime to withhold information from a bankruptcy petition. 2) TIMELY PAYMENT / LAW CHANGES - Client agrees to pay fees in full as soon as possible. Attorney's advice to client is based on current Local, State and Federal laws. Client agrees to hold LEEDERS harmless for damages related to changes in the law that affect client's ability to qualify for bankruptey relief or to discharge debts within a bankruptey case. 3) STATE LAW PROCEEDINGS - Client must personally appear at all state court proceedings. LEEDERS does not represent client in any non-bankruptcy matters in state or federal court, including, but not limited to, divorce proceedings, contempt hearings, citation to discover assets, rules to show cause, or any other civil lawsuits. 4) REFUNDS - If client chooses to terminate LEEDERS' representation at any time, client is only entitled to a refund of unearned fees. LEEDERS' hourly rate is \$300.00 per hour for purposes of determining any refund. Client must submit written request of cancellation. After receiving written notice, LEEDERS will take approximately 30 days to do an accounting and issue a refund check of any unearned attorneys fees paid to date. 5) REAFFIRMATIONS & RESCISSIONS - Reaffirmations are not required under the code. Reaffirmations must be filed within 60 days of the date first set for your §341 hearing. LEEDERS does not guarantee acceptance or filing of the reaffirmation if it poses an undue hardship on client. Client understands creditor must sign and file the reaffirmation, so return with ample time to do so before the deadline. Client may only rescind or cancel a reaffirmation agreement by sending written request by certified mail to LEEDERS no less than 30 after reaffirming the debt. 6) §341 MEETING OF CREDITORS. Client must attend a §341 meeting approximately four weeks after client's case is filed. Client agrees to call LEEDERS to obtain the §341 meeting date if client has not received notice of the meeting. LEEDERS must appear even if client does not. 7) ADVERSARY OBJECTIONS TO DISCHARGE: LEEDERS's fee for negotiating a settlement is approximately \$500.00 to be paid in advance of settlement. LEEDERS's hourly fee for litigating a discharge issue is \$300.00 per hour, ten hours to be paid in advance as retainer. 8) NSF CHECKS - Client agrees to pay a \$35.00 bounced check fee to LEEDERS for any returned checks not honored by client's bank for any reason. 9) GROUP PRACTICE/ CO-COUNSEL - Client permits all employees of LEEDERS to work on client's case and permits LEEDERS to hire co-counsel or independent attorneys to work on this matter and divide fees with them on the basis of work and responsibility. Client authorizes LEEDERS to have attorneys within the firm, or outside counsel, review client's file to explore other potential causes of action client may have. 10) AUDIT - I understand that the US Trustee may audit my bankruptcy file and I agree to cooperate fully with the audit. I agree to preserve all financial information and documents used to create my bankruptcy petition for 2 years after discharge. 11) CREDIT COUNSELING. Client understands they must complete a pre- and post filing bankruptcy course. The pre-filing certificate is valid for 180 days, so case must be filed before expiration or course must be completed again at client's expense. The post-filing certificate must be filed within 45 days after case filing, so take the post-filing course as soon as possible after filing. If not timely filed, client's case may close without a discharge. 13) HOMEOWNER/CONDO ASSESSMENTS. Client understands that all Homeowner Association/Condo association fees are non dischargeable in bankruptcy, and client has a continuing obligation to pay all such charges, even if surrendering property, until property is sold or a foreclosure is completed. 14) GREEN INITIATIVE - LEEDERS will make all attempts to be green. This includes electronic case filing, scanning and destroying of client documents, sending email instead of first class mail. LEEDERS will make client documents available to client for pickup for 90 days after completion of the case, or else LEEDERS can mail them to client for \$20,00. Client documents will be destroyed 90 days after the close of the case. 15) CLIENT CONTACT INFORMATION - Client agrees to keep LEEDERS up to date with valid email address, phone numbers and mailing addresses for the duration of the case.

Possible additional fees not included in fee quote above:

- 1. Amendments: \$230.00 each time. There is no charge to amend for a change of address.
- 2. Missed court date or 341 meeting of creditors: \$200.00 each.
- 3. Reaffirmations \$100.00 each
- 4. Redemptions \$600.00 each Paid thru the vehicle refinancing.
- 5. Delay: \$150.00 Charge will only incur if 8 months has elapsed without: a client payment, return of mailed petition, or last request for case information.
- 6. Avoiding Judgment Liens against real estate \$450.00
- 7. Avoiding lien on non-purchase money security interests \$400.00
- 8. Motion to reopen a closed bankruptey case-\$600.00 For any motion to reopen a closed bankruptey case for <u>any</u> reason once the case is discharged. These additional motion fees are to be paid prior to LEEDERS drafting such motion. Client acknowledges that there is a limited time to bring such motions.

| Client Signature & Linny & Physics | Date / -23 Spouse Signature | Date  |
|------------------------------------|-----------------------------|-------|
| 9                                  | 18.5/1/                     | - 1-1 |
| Attorney Signature X               | In the                      | DATE  |

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# **United States Bankruptcy Court**Northern District of Illinois

|       |   | Not then District of Infinois                               |                  |                           |
|-------|---|---|------------------|---------------------------|
| In re | Jimmy L Robinson                          |   | Case No.         |                           |
|       |   | Debtor(s)   | Chapter          | 7                         |
|       | VI  | ERIFICATION OF CREDITOR M                                   | IATRIX           |                           |
|       |   | Number of   | Creditors:       | 7                         |
|       | The above-named Debtor(s (our) knowledge. | ) hereby verifies that the list of credi                    | tors is true and | correct to the best of my |
| Date: | January 26, 2018                          | /s/ Jimmy L Robinson  Jimmy L Robinson  Signature of Debtor |                  |                           |

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

City of Chicago Bureau of Parking 121 N La Salle St RM 107 A Chicago, IL 60602

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Jefferson Capital Systems, LLC 16 Mcleland Rd Saint Cloud, MN 56303

Seventh Ave 1112 7th Ave Monroe, WI 53566

Shindler & Joyce 1990 E Algonquin Rd. #180 Chicago, IL 60632